

Working towards a healthier Williamson County.

The Williamson County Benefits Department has adopted a visionary plan to improve the health and well being of the employees, covered dependents, retirees of Williamson County Government and Board of Education.

January 1, 2009, the Williamson County Benefits Department will be launching the campaign "WC Cares" Working towards a healthier Williamson County. We feel it's time to make sure all our employees and their dependants take control of their individual needs to improve their health.

OPEN ENROLLMENT

Each year employees have the opportunity during the annual open enrollment period to review their current coverages and make changes to meet their needs for the upcoming year. The annual open enrollment period will continue through December 1, 2008.

Take Control – What do I need to do for Open Enrollment?

BENEFIT STATEMENT - Included with this brochure is your personalized Benefit Statement, which lists all the programs you and your family are currently enrolled. This statement provides the current per pay period deduction (2008 column) for each benefit you are enrolled and the 2009 per pay period deduction (2009 column) that will be effective for those benefits you are currently enrolled. Review this Benefit Statement carefully and make sure it is accurate. If you feel any information is incorrect, please contact the Benefits Department.

FLEXIBLE SPENDING ACCOUNT - This is the only program for which you must re-enroll if you wish to continue for 2009. Re-enrollment can be done through the "Online Wizard" until midnight December 1, 2008 or completing an enrollment/change form, which will be accepted via fax or mail until the close of business December 1, 2008. If you do not re-enroll in the flexible spending account for 2009, this benefit will terminate December 31, 2008.

NO CHANGES! If you choose to make NO changes to your current benefits as outlined on your Benefit Statement, you need to do nothing further, EXCEPT for those participating in the Flexible Spending Account. If no changes are being made, the benefits listed on your Benefit Statement will continue and the 2009 cost will automatically change for continuation of benefit coverage January 1, 2009.

CHANGES – All changes will require the employee to submit either an online submission through the "Online Wizard" mybenefits.williamsoncounty-tn.gov or by completing the necessary forms, which can be accessed from www.williamsoncounty-tn.gov/mybenefits. Deadline to submit a change is December 1, 2008. Changes can be made through the "Online Wizard" until midnight December 1, 2008 or completing an enrollment/change form, which will be accepted via fax or mail until the close of business December 1, 2008.

Need a form.... Go to www.williamsoncounty-tn.gov/mybenefits or email LeAyn Barnhill at leaynb@williamson-tn.org or leaynb@wcs.edu.

New Deductions Effective January 1, 2009



Williamson County School Board (20 pay period deductions)

	Deductible	Co-Pay	Reimbursement	Dental	Vision
Employee	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 4.68
Employee +1	\$ 66.38	\$ 53.00	\$ 9.00	\$ 8.57	\$ 8.76
Employee Family	\$125.58	\$102.85	\$15.00	\$ 8.57	\$13.38
Spousal Surcharge ee+1	\$126.38	\$113.00	N/A	N/A	N/A
Spousal Surcharge Family	\$185.58	\$162.85	N/A	N/A	N/A



Williamson County Government (26 pay period deductions)

	Deductible	Co-Pay	Reimbursement	Dental	Vision
Employee	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 3.60
Employee +1	\$ 51.06	\$ 40.77	\$ 6.93	\$ 6.59	\$ 6.74
Employee Family	\$ 96.60	\$ 79.11	\$11.54	\$ 6.59	\$10.30
Spousal Surcharge ee+1	\$ 97.21	\$ 86.92	N/A	N/A	N/A
Spousal Surcharge Family	\$142.75	\$125.27	N/A	N/A	N/A



The "Online Wizard" is the link to your Benefits....You can use this tool for initial enrollment, qualifying event changes through out the year, open enrollment or just to review your benefits and payroll deductions at your convenience.

Log on to <u>mybenefits.williamsoncounty-tn.gov</u> and enter the login and password provided to you on the enclosed benefit statement.

The "Online Wizard" is easy to use and saves time. There will be times when additional documentation is required to complete the online submission. The "Online Wizard" will prompt you if additional documentation is required. Your online submission for a change in your benefits will not be completed until the required documentation is received by the Benefits Department within the applicable time frame.

If you have any questions while making changes with the Online Wizard, just click the Contact Support button at the bottom right of the screen. An information bubble will pop up with the phone number and e-mail address of the Benefits employee who can best help you.



July 1, 2008 Williamson County increased the maximum lifetime benefit amount to \$3,000,000 on both the Deductible and Co-Pay medical plans. This gives each enrolled member an additional \$1,000,000 in medical benefits

Williamson County Benefits Department Contact Information

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PLAN option for those with other coverage



Reimbursement Plan - Family members with primary medial coverage or employees with other coverage available may choose to enroll in this option to cover expenses, such as deductibles, co-pays, prescription co-pays and wellness benefits their primary medical insurance coverage may leave them with.

The participant(s) must be enrolled in another medical plan as primary coverage. The participant enrolling in the Reimbursement Plan cannot be enrolled in the Williamson County deductible or co-pay medical plan options.

Reimbursement of eligible expenses will be allowed only for those employees and eligible dependents enrolled in a primary insurance medical plan and are enrolled in the Williamson County Reimbursement Plan. Eligible dependents must meet the eligibility criteria as outlined in the Plan Document and Summary Plan Description for the Deductible and Co-pay medical plans

Reimbursement Plan

Summary of Plan effective January 1, 2009

\$1500 Individual		
\$3000 Family		
100% of the first \$500 of eligible expenses submitted (\$500 maximum)		
50% of the next \$1000 of eligible expenses (\$500 maximum)		
Eligible expenses must be covered expensed under the primary carrier including;		
2. Deductible		
3. Co-insurance or out-of-pocket		
4. Physician Co-Pays		
5. Prescription Co-pays		
100% up to \$500 of eligible expenses not paid by the primary insurance carrier.		
1. Child Immunizations		
2. Well Baby Check-ups		
3. Adult Routine Physicals		
4. Pap Smears		
5. Mammograms		
6. PSA		
7. Well Check Lab Work		
8. Reimbursement for wellness expenses may be allowed when a primary carrier		
excludes wellness benefits from the plan.		
Full time employees that have other coverage available		
2. Eligible family members that have primary medial coverage		
3. The above schedule of benefits is only applicable for expenses incurred by the		
employee and eligible dependents that are covered by a primary insurance plan.		
Services not covered by the other insurance plan.		
Charges above Usual & Customary		
Explanation of Benefits from primary carrier must be submitted at time of claim.		
1 year filing limit on claims from date of service		

^{*} Note: This plan is not primary insurance. Please check with your primary plan to ensure there is no requirement that a Full Time Employee of Williamson County must enroll in one of the offered medical plans.

Just a reminder..... Spousal Surcharge

Williamson County put in place 1/1/07 a spousal surcharge for those spouses that enroll in the Williamson County medical program as primary coverage when coverage is offered through their employer. It is the responsibility of the employee to notify the Benefits Department of coverage availability for a spouse that is enrolled on the medical plan who has an effective date on or after January 2, 2007.

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As a reminder, any child who is over the age of 19 and enrolled on your insurance must be a full time student to be eligible for coverage. It is your responsibility to notify the Benefits Department if your child graduates from college, doesn't return for a semester or is no longer full time for any reason within 30 days of the event





Williamson County will be offering a new vision plan underwritten by Principal Financial Group to all full time employees and their eligible dependents effective January 1, 2009.

Benefits include:

- 1. Routine eye exam every 12 months
- 2. And **one** of the following;
 - a. A set of frames every 12 months and two lenses (one pair) every 12 months, or
 - b. Contact lenses benefit equal to your frame plus single vision lenses benefit. This amount is equal to a benefit of up to \$175.
- 3. No Provider Network..... You have the freedom to choose any optometrist or ophthalmologist of your choice and receive the below listed benefits every 12months.
 - a. Exams \$75
 - b. Frame \$125
 - c. Lenses:
 - i. single vision \$50
 - ii. bifocal \$75
 - iii. trifocal \$100
 - iv. lenticular \$100
 - v. lenses (one pair) \$50
 - d. Contact Lenses (in lieu of lenses and frames) \$175

If you are currently enrolled in the Spectera vision program and would like to continue coverage, you will automatically be enrolled in the Principal vision program for 2009. If you do not want to continue this benefit or would like to enroll for 2009, changes can be made through the "Online Wizard" or by completing an enrollment/change form.

Changes to the Medical and Dental Plans for January 1, 2009

Deductible Plan

1. Out of Pocket Reimbursement for NON-PHCS providers - This only pertains to reimbursement of eligible claims when using an out of network provider. Once the yearly out of network deductible is met all claims paid to NON-PHCS providers will be paid at 50%.

Out of Pocket Reimbursement

Current

Fifective 1/1/09

70%

50%

2. <u>Out of Pocket Maximums.</u> Once the yearly in-network deductible is met, you have an out of pocket maximum that limits medical expenses paid by you. The out of pocket maximum with increase to:

Current Maximum Maximum Eff 1/1/09

a.	Per Covered Person	\$1300	\$1500
b.	Family Unit	\$2600	\$3000

3. <u>Wellness Benefits</u>. Eligible charges for wellness benefits will be covered up to a maximum of \$1,000 after appropriate deductible.

Co-Pay Plan

- 1. Per Visit Co-Pay
 - a. Primary Care Co-Pay \$20.00
 - b. Specialist Visit Co-Pay \$35.00
- 2. <u>Wellness Benefits</u>. Eligible charges for wellness benefits will be covered up to a maximum of \$1,000 after appropriate co-pay.

Dental

- 1. Diagnostic & Preventive Advantage Effective January 1, 2009, charges for diagnostic and preventive services will not be applied to the \$1000 annual dental maximum. This will allow for the member to utilize the \$1000 annual maximum for times when more costly procedures are necessary!
- 2. Coverage for posterior composite fillings (white fillings)
- 3. Evidence Based Benefits

Please see the Williamson County Benefits Website for a complete description of New Plans and Plan Changes for January 1, 2009.